

Planning Services
Location: 400 W. Gowe • Mail to: 220 4th Avenue South • Kent, WA 98032-5895

Permit Center (253) 856-5302 FAX: (253) 856-6412

www.ci.kent.wa.us/permitcenter

# Special Home Occupation Permit Application

## Please print in black ink only.

Application Fee and Public Notice Board(s)...See Fee Schedule

Application #:	KIVA #:
OFFICE USE ONLY	OFFICE USE ONLY
	Zone:
King County Farcer Number (s).	<u></u>
Applicant: (mandatory)	
Name:	Daytime Phone:
Mailing Address:	Fax Number:
City/State/Zip:	Signature:
Professional License No:	Contact Person:
Property Owner 1: (mandatory if different from	applicant)
Name:	Daytime Phone:
Mailing Address:	Fax Number:
City/State/Zip:	Signature:
Property Owner 2: (if more than two property	owners attach additional info/signature sheets)
Name:	Daytime Phone:
Mailing Address:	Fax Number:
City/State/Zip:	Signature:
	e above information is true and correct to the best of our knowledge are all of the legal owners of the property described above and with respect to this application:
Agent/Consultant/Attorney: (mandatory if pr	imary contact is different from applicant)
Name:	Daytime Phone:
Mailing Address:	Fax Number:
City/State/Zip:	License No.:
• • • • • • • • • • • • • • • •	
OFFICE USE ONLY:	
Date Application Received:	Received by:
Date Application Complete:	Completeness Review by:

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## Criteria

The purpose of the home occupation zoning criteria is to help preserve the residential character of the city's neighborhoods from commercial development while recognizing that certain selected business activities are compatible with residential uses.

Please complete the following questions.
Does the home occupation employ a non-resident of the household?
If yes, how many?
Does the home occupation require any outdoor storage or display of goods and services?
If yes, please describe:
How much floor area (in square feet) will be used for the home occupation?
Are there any signs proposed for the home occupation?
If yes, please give total square footage and dimensions:
Will the home occupation require delivery of material by truck?
If yes, describe type of truck and expected frequency of delivery:
Will the home occupation generate the demand for more parking spaces other than those needed by residents of the dwelling unit?
If yes, please describe the measures that will be taken as to not adversely impact the parking needs of the neighborhood
What are the proposed hours of operation for the home occupation?
Describe the type of goods and/or services generated by the home occupation.

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How many clients will be served on a daily basis?
Will there be multiple clients arriving at any one time?
If yes, please describe:
Does the home occupation involve any retail sales?
Describe any additional mechanical or electrical equipment that are needed for the home occupation.
Will the home occupation increase the demand for utilities beyond a normal residential use?
If yes, please describe:
Please indicate all increases in noise, vibration, smoke, dust, odors, heat, glare or other conditions that may result from the home occupation.
Describe the measures that will be taken to ensure that the residential character of the neighborhood is maintained and that the home occupation is not materially detrimental to the public welfare.

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## Special Home Occupation Permit Submittal Requirements Checklist

THE APPLICANT MUST PROVIDE THE FOLLOWING INFORMATION WHEN SUBMITTING A SPECIAL HOME OCCUPATION APPLICATION:

- A. The completed original application making sure that all of the required signatures have been obtained.
- ☐ B. Five (5) copies of SHOP Criteria.
- C. Provide five (5) detailed site plans which include the following information:
  - 1 Vicinity map
  - 2. Property lines
  - 3. Lot dimensions
  - 4. All public/private roads
  - 5. All easements
  - 6. Uses of abutting properties
  - 7. Paved areas
  - 8. Parking areas
  - Vehicle loading areas
  - 10. Location of buildings on property
  - 11. Identification of feature needing the Special Home Occupation Permit.

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## Special Home Occupation Permit (SHOP) Application Instructions

## I. Application Forms/Fees

- A. Fill out attached application form making sure that the proper signatures are obtained.
- B. Answer all questions clearly and provide all information requested on the application form.
- C. Return the completed application form and application fee to Planning Services.
- D. A nonrefundable application fee applies.
   See Fee Schedule for application fees.
   Make checks payable to the City of Kent.

## **II. Filing Application**

A. Deadlines

An application will be heard no later than 60 days from the date the application is received as complete.

B. Modifications

Changes in the application must be submitted no later than two (2) working weeks prior to the scheduled public hearing on the application.

C. Public Notice

Notice of the time and place of the public hearing shall be given at least ten (10) days prior to the public hearing. Public notice shall take form of a mailing to property owners within 200 feet of the site.

## **III. The Hearing Examiner Public Hearing**

- A. Presentation by city staff to describe the application, summarize issue presented, and give a recommendation;
- B. Presentation by applicant or representative;

- Presentations, questions or statements by members of the public interested in the application;
- D. Responses to questions by staff and applicant (rebuttal);
- E. Final recommendation by city staff (if necessary);
- F. Applicant and public may be permitted to respond to final recommendations if appropriate.

### IV. Final Disposition of Case

- A. The Hearing Examiner will issue a written decision within fourteen (14) calendar days from the date of the hearing. Parties of record will be notified in writing of the decision. The Examiner's decisions are final unless appealed.
- B. Before any Special Home Occupation Permit may be granted, it shall be shown and the Hearing Examiner shall find:
  - The Special Home Occupation Permit will not be materially detrimental to the public welfare or injurious to the property in the zone or vicinity in which the property is located.
  - The authorization of such permit will be consistent with the spirit and purpose of this Title.
- C. The issuance of a Special Home Occupation Permit will be made by Planning Services following the approval of said permit by the Hearing Examiner.

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### V. Reconsiderations and Appeals

#### **Request of Reconsideration**

Any aggrieved person may request a reconsideration of a decision by the Hearing Examiner if either (a) a specific error of fact, law, or judgment can be identified or (b) new evidence is available which was not available at the time of the hearing. Reconsideration requests should be addressed to: Hearing Examiner, 220 Fourth Avenue S., Kent, WA 98032. Reconsiderations are answered in writing by the Hearing Examiner.

#### **Notice of Right to Appeal**

ORDINANCE 3320 (excerpt): The decision of the Hearing Examiner is final unless the original applicant or an adverse party files a land use petition in King County Superior Court according to the procedures outlined in Chapter 36.70 C RCW, Judicial Review of Land Use Decisions. The petition must be filed within 21 calendar days from the date of the notice of decision.

#### **DUE PROCESS CONSIDERATIONS.**

Hearings before the Hearing Examiner are quasijudicial proceedings. This means that certain due process protections apply. For example, no one may contact the Hearing Examiner for the purpose of influencing a decision in any manner other than in the public hearing. The state Supreme Court has also ruled that, not only must quasi-judicial proceedings be fair, they must appear to be fair. Accordingly, the Hearing Examiner may not participate in any matter where he or she has a financial or personal interest, or where he or she has prejudged the matter in any way. Any person who has grounds to believe the Hearing Examiner may be influenced by a consideration outside the public record should promptly bring that concern to the attention of the Hearing Examiner.

Any person requiring a disability accommodation should contact the City in advance for more information. For TDD relay service, call 1-800-635-9993 or the City of Kent at (253) 856-5725.

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